

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Complete if Known

Application No.

10/522,419 ✓

Filing Date

January 26, 2005

First Named Inventor

Frederic Tort

Group Art Unit

1714

Examiner Name

Shruti S. Costales

Total Number of Pages in This Submission 21

Attorney Docket No.

2937-124

Customer No.

6449

ENCLOSURES (check all that apply)

Confirmation No.

5654

☒ Fee Transmittal Form

☐ Assignment Papers

☐ After Allowance
Communication to Group

☐ Fee Attached

☐ Drawing(s)

☐ Appeal Communication to
Board of Appeals and
Interferences

☒ Amendment/Reply

☐ Licensing-related Papers

☐ After Final

☐ Petition

☐ Appeal Communication to
Group (Appeal Notice, Brief,
Reply Brief)

☐ Affidavits/declaration(s)

☐ Petition to Convert to a
Provisional Application

☐ Extension of Time Request

☐ Power of Attorney, Revocation
Change of Correspondence
Address

☐ Proprietary Information

☐ Express Abandonment Request

☐ Status Letter

☒ Information Disclosure
Statement and 1449

☐ Terminal Disclaimer

☐ Other Enclosure(s) (please
identify below):

☐ Certified Copy of Priority
Document(s)

☐ Request for Refund


☐ Response to Missing Parts/
Incomplete Application

☐ CD, Number of CD(s)

REMARKS:

☐ Response to Missing Parts
under 37 CFR 1.52 or 1.53

SUBMITTED BY		Complete (if applicable)	
NAME AND REG. NUMBER	Leigh Z. Callander, Reg. No. 55,035		
SIGNATURE	DATE	DEPOSIT ACCT USER ID	
	January 23, 2006	02-2135	

 FEE TRANSMITTAL for FY 2006 (Large Entity)		<i>Complete if Known</i>	
		Application Number	10/522,419
		Filing Date	January 26, 2005
		First Named Inventor	Frederic Tort
		Examiner Name	Shruti S. Costales
		Group Art Unit	1714
<input type="checkbox"/> Applicant claims small entity status		Attorney Docket Number	2937-124
Total Amount of Payment	(\$) 780.00	Confirmation Number	5654

METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge the fees indicated below or credit overpayment to Deposit Account Number 02-2135 in the name of Rothwell, Figg, Ernst & Manbeck
- ☐ Charge any additional fee required under 37 CFR 1.16 and 1.17 to Deposit Account No. 02-2135.
2. ☐ Payment by check enclosed

FEE CALCULATION (continued)

4. ADDITIONAL FEES

Fee Code	Fee Paid	Fee Description	Fee Paid
1051	130	Surcharge - late filing fee or oath	[]
1052	50	Surcharge - late provisional filing fee or cover sheet	[]
1053	130	Non-English specification	[]
1812	2,520	For filing a request for reexamination	[]
1804	920	Requesting publication of SIR prior to Examiner action	[]
1805	1,840	Requesting publication of SIR after Examiner action (reduced by basic filing fee paid)	[]
1251	120	Extension for reply within first month	[]
1252	450	Extension for reply within second month	[]
1253	1,020	Extension for reply within third month	[]
1254	1,590	Extension for reply within fourth month	[]
1255	2,160	Extension for reply within fifth month	[]
1401	500	Notice of Appeal	[]
1402	500	Filing a brief in support of an appeal	[]
1403	1,000	Request for Oral Hearing	[]
1451	1,510	Petition to institute a public use proceeding	[]
1452	500	Petition to revive -unavoidable	[]
1453	1,500	Petition to revive - unintentional	[]
1807	50	Processing fee under 37 CFR 1.17(q)	[]
1806	180	Submission of Information Disclosure Statement	[180.00]
1809	790	Filing a submission after final rejection (37 CFR 1.129(a))	[]
1810	790	For each additional invention to be examined (37 CFR 1.129(b))	[]
1801	790	Request for Continued Examination (RCE)	[]
1802	900	Request for expedited examination of a design application	[]
1504	300	Publication fee for early, voluntary, or normal publication	[]
1505	300	Publication fee for republication	[]
1455	200	Filing application for patent term adjustment	[]
1456	400	Request for reinstatement of term reduced	[]
1814	130	Statutory Disclaimer	[]
Other fee (specify)			[]

FEE CALCULATION
1. FILING, SEARCH AND EXAMINATION FEES

Code	Fee	Fee Description	Fee Paid
1001	300	Utility Filing Fee	[]
1111	500	Utility Search Fee	[]
1311	200	Utility Examination Fee	[]
1002	200	Design Filing Fee	[]
1112	100	Design Search Fee	[]
1312	130	Design Examination Fee	[]
1003	200	Plant Filing Fee	[]
1113	300	Plant Search Fee	[]
1313	160	Plant Examination Fee	[]
1004	300	Reissue Filing Fee	[]
1114	500	Reissue Search Filing Fee	[]
1314	600	Reissue Examination Fee	[]
1005	200	Provisional Filing Fee	[]

SUBTOTAL \$
2. CLAIMS

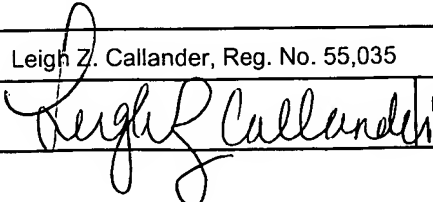
	Extra Claims	Fee	Fee Paid
Total Claims [40] - 28* = [12] x		\$50 = [600.00]	
Independent Claims [3] - 6* = [0] x		200 = [0]	
Multiple Dependent Claims +		360 = []	

*or number previously paid, if greater

SUBTOTAL \$600.00
3. APPLICATION SIZE FEE

 Total Sheets [] - 100 = []/50 = []** x \$250 =
 ** Number of each additional 50 or fraction thereof

SUBTOTAL \$
SUBTOTAL \$180.00

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NAME AND REG. NUMBER	Leigh Z. Callander, Reg. No. 55,035		
SIGNATURE	DATE	DEPOSIT ACCOUNT USER ID	
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